

Docket No.: E7900.2041/P2041  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

\_\_\_\_\_  
In re Patent Application of:  
Uwe Schnitzler

Application No.: 10/595,682

Confirmation No.: 4667

Filed: May 4, 2006

Group Art Unit: n/a

For: INSTRUMENT FOR PLASMA  
COAGULATION  
\_\_\_\_\_

Examiner: n/a

**SUBMISSION OF REVOCATION OF PRIOR POWER OF ATTORNEY AND  
APPOINTMENT OF NEW ATTORNEY AND STATEMENT UNDER 37 CFR 3.73(b)**

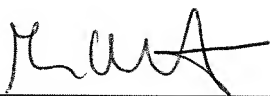
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is a Revocation of Prior Power of Attorney and Appointment of New Attorney and Statement Under 37 CFR 3.73(b) in relation to the above-captioned matter. In addition, please change the Attorney Docket Number for all correspondence associated with this patent application to Attorney Docket Number E7900.2041/P2041.

Dated: October 11, 2007

Respectfully submitted,

By  \_\_\_\_\_

Gianni Minutoli

Registration No.: 41,198  
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Attorney for Applicant

**REVOCATION OF  
PRIOR POWER OF ATTORNEY  
AND APPOINTMENT OF  
NEW ATTORNEY**

Application Number	10/595,682
Filing Date	May 4, 2006
First Named Inventor	Uwe Schnitzler
Title	INSTRUMENT FOR PLASMA COAGULATION
Group Art Unit	n/a
Examiner Name	n/a
Attorney Docket No.	E7900.2041/P2041

I hereby revoke all powers of attorney previously granted and hereby appoint:

☒ Practitioners at Customer Number 24998 →   
*Customer Number* *Customer Number Bar Code*

☐ Practitioner(s) named below:

Name	Registration Number	Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.  
*OR*  
☒ Practitioners at Customer Number 24998 →   
*Customer Number* *Customer Number Bar Code*

☐ Firm or Individual Name Gianni Minutoli  
DICKSTEIN SHAPIRO LLP

Address 1825 Eye Street, NW

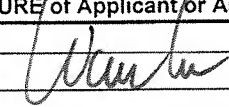
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I am the:

☐ Applicant/Inventor.  
☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).*

**SIGNATURE of Applicant or Assignee of Record**

Name Christian Erbe

Signature 

Date 09/27/07

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below\*.

☐ \*Total of 1 forms are submitted.